

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIALIZED **10/532197** FILING DATE
APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.	4	↓		↓		↓
TOTAL DEP.	145	←		←		←
TOTAL CLAIMS	24					

	AS FILED		AFTER 1 st AMENDMENT		AFTER: 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.		↓	6	↓		↓
TOTAL DEP.		←	43	←		←
TOTAL CLAIMS			49			

Best Available Copy